ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	8-2-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ .... Rejected		N .... Non-elected	
= .... Allowed		I .... Interference	
— (Through numeral)... Canceled		A .... Appeal	
÷ .... Restricted		O .... Objected	

Claim Final	Claim Original	1/30/0	10/7/0	6/26/0	4/1/04
	1	✓			
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				
	11				
	12				
	13				
	14				
	15	↓			
	16		✓	✓	✓
	17				
	18				
	19				
	20				
	21				
	22			↓	↓
	23			O	O
	~~24~~				
	25			O	O
	26			O	O
	27			✓	✓
	28			✓	
	29			O	
	30		↓	O	↓
	31				
	32				
	33				
	34				
	35				
	36				
	37				
	38				
	39				
	40				
	41				
	42				
	43				
	44				
	45				
	46				
	47				
	48				
	49				
	50				

Claim Final	Claim Original	Date
	51	
	52	
	53	
	54	
	55	
	56	
	57	
	58	
	59	
	60	
	61	
	62	
	63	
	64	
	65	
	66	
	67	
	68	
	69	
	70	
	71	
	72	
	73	
	74	
	75	
	76	
	77	
	78	
	79	
	80	
	81	
	82	
	83	
	84	
	85	
	86	
	87	
	88	
	89	
	90	
	91	
	92	
	93	
	94	
	95	
	96	
	97	
	98	
	99	
	100	

Claim Final	Claim Original	Date
	101	
	102	
	103	
	104	
	105	
	106	
	107	
	108	
	109	
	110	
	111	
	112	
	113	
	114	
	115	
	116	
	117	
	118	
	119	
	120	
	121	
	122	
	123	
	124	
	125	
	126	
	127	
	128	
	129	
	130	
	131	
	132	
	133	
	134	
	135	
	136	
	137	
	138	
	139	
	140	
	141	
	142	
	143	
	144	
	145	
	146	
	147	
	148	
	149	
	150	

BEST AVAILABLE C

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)